## **CLAIM FORM FOR CATASTROPHIC PROPERTY LOSS**

THIS FORM IS TO BE COMPLETED BY THE CLAIMANT			
CVR NUMBER:	CLAIMANT:	VICTIM:	
Your claim investigator is:		If you need assistance,	call:
Catastrophic property loss cov homes that are rented, nor do	ers the loss of a home due to es it cover loss of contents.	the crime of arson. It does not c	cover apartments or
STEP 1. ANSWER THESE QUESTIONS ABOUT THE PROPERTY LOSS:			
1. Are you filing becaus	e your home was destroye	ed by the crime of arson? [ ]	Yes [ ] No
2. Did you own your ho	me?	[ ]	Yes []No
3. Were you renting?		[ ]	Yes [] No
4. Were you living in the	e home at the time of the in	ncident? [ ]	Yes [ ] No
<ol> <li>STEP 2. GATHER THE FOLLOWING NECESSARY DOCUMENTS AND RETURN WITH THIS FORM.</li> <li>A copy of your homeowner's insurance policy</li> <li>A copy of the insurance adjustor's report.</li> <li>A copy of the insurance settlement.</li> <li>A copy of the Fire Marshall's incident report.</li> <li>Appraisal of damages.</li> <li>Proof of ownership.</li> </ol>			
STEP 3. PROVIDE THE FOLLOWING INFORMATION:  Name of Homeowner's Insurance Company  Address:  Phone: Agent:			
STEP 4. ESTIMATED TOTAL LOSS OF PROPERTY: \$			
STEP 5. SIGN HERE:  DATE:			